# **Ongoing Clinical Protocols at Ochsner**

At any given time, between 600 and 800 active clinical trials are taking place at Ochsner Clinic Foundation. A selected few are listed here. If you have patients meeting the listed criteria for a given trial, please call the contact numbers for more information on enrollment. For more information about Ochsner's research programs, please call Ochsner Research Administration at 504 842-3265.

# **Antocoagulation**

**Sponsor**: DuPont Pharmaceutical Company

Contact: Steven Deitelzweig, MD 504-842-5766 Lindsey Kersker, RN 504-842-23555

# Title:

A phase II, multicenter, randomized, open-label, prospective study to evaluate tinzaparin vs. unfractionated heparin in subjects who are receiving long-term warfarin and require parenteral anticoagulation after the discontinuation of warfarin therapy for an invasive surgical procedure.

# Objective:

To determine the cumulative incidence of the composite end point of thromboembolic and major bleeding events for subjects managed with tinzaparin and for those managed with unfractionated heparin as bridging therapy.

# **Inclusion Criteria**:

- Patients 18 years or older who have received long-term oral warfarin therapy prior to screening
- Require parenteral bridging therapy prior to a scheduled, elective invasive procedure or surgery
- Have one INR within target range appropriate for the indication for which the patient is receiving warfarin

#### **Exclusion Criteria**:

- Undergoing epidural or spinal anesthesia or puncture
- Body weight >356 lbs.
- Active bleeding (including positive stool hemoccult or urine positive for blood) or at high risk for bleeding
- Diagnosis of DVT or PE within the past month or thrombolytic stroke within the past 6 months
- History of CNS or intraocular hemorrhage or heparin-induced thrombocytopenia
- Allergy to unfractionated heparin, LMWH, pork, or sulfite
- Active peptic ulcer disease or hepatitis
- Use of anticoagulants (other that warfarin), antiplatelets, and other LMWHs within 2 weeks of study initiation
- Blood dyscrasias
- Have vena cava filters inplace

Tinzaparin is provided free to patients in the tinzaparin arm.

# **Breast Cancer Prevention**

**Sponsor**: National Cancer Institute

**Investigator**: Carl Kardinal, MD 504 842-3708

#### Title:

Study of tamoxifen and roloxifene (STAR) for the prevention of breast cancer.

# **Study Objective:**

To determine whether raloxifene is more or less effective than tamoxifen in reducing the incidence of breast cancer in postmenopausal women at increased risk for the disease.

#### Inclusion Criteria

- Female over the age of 34
- Postmenopausal
- Must complete a Risk Assessment Form to evaluate eligibility

# **Exclusion Criteria**

- History of invasive cancer
- Bilateral or unilateral prophylactic mastectomy
- History of deep vein thrombosis, pulmonary embolus, cerebrovascular accident, or transient ischemic attack
- Uncontrolled high blood pressure or diabetes

# **Chronic Renal Insufficiency**

**Sponsor:** Amgen, Inc. **Contact:** Jill Lindberg, M

Jill Lindberg, MD Melissa Palmer. 504 842-6526

Research Study Coordinator

# Title:

Pilot study on the impact of anemia correction on left ventricular hypertrophy (LVH) in subjects with chronic renal insufficiency (CRI) without symptomatic heart disease treated with novel erythrpoiesis-stimulating protein.

# **Objectives:**

To assess the safety of chronic NESP therapy in subjects with CRI. The primary objective of this multicenter, open-label, single-arm,

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# **Objectives:**

To assess the safety of chronic NESP therapy in subjects with CRI. The primary objective of this multicenter, open-label, single-arm, phase II study is to determine the impact of anemia correction to a target hemoglobin of  $13.0 + 1.0 \, \text{g/dL}$  on left ventricular mass index (LVMI) in subjects with CRI treated with NESP. Secondary objective is to determine the impact of anemia correction to a target hemoglobin of  $13.0 + 1.0 \, \text{g/dL}$  on left ventricular end diastolic diameter (LVEDD) in subjects with CRI treated with NESP.

#### **Inclusion Criteria:**

- CRI patients between 18 and 65 years old not expected to initiate dialysis for 36 weeks after the planned first dose of study drug
- Documented LVH by EKG (confirmed at screening)
- Creatinine clearance <40 mL/min
- Mean hemoglobin <10 g/dL on two consecutive occasions
- t-sat 20%-50%
- Normal serum vitamin B12 and folate levels

# **Exclusion Criteria:**

- Uncontrolled hypertension
- Documented ischemic heart disease, congestive heart failure, or systemic hematologic disease, or known positive HIV antibody or hepatitis B surface antigen
- r-HuEPO therapy within 12 weeks before informed consent
- Clinical evidence of severe hyperparathyroidism, current

# **Hypothermia for Acute Myocardial Infarction**

**Sponsor:** Radiant Medical, Inc **Contact:** I. Stephen Jenkins, M

J. Stephen Jenkins, MD 504 842-3786 Dolores Street 504 842-5071

# Title:

Hypothermia as an adjunctive therapy to percutaneous intervention in patients with acute myocardial infarction.

# Objective:

To evaluate the safety and feasibility of induced hypothermia using the Radiant Medical SetPoint<sup>TM</sup> System as an adjunctive therapy to primary angioplasty in patients with acute myocardial infarction when compared with PTCA, with or without stenting.

#### **Inclusion Criteria:**

- At least 18 years of age eligible for PTCA
- Symptoms consistent with acute MI lasting >30 min but <6 h and unresponsive to nitroglycerin</li>
- ST segment elevation of >1 mm in two or more contiguous leads

# **Exclusion Criteria:**

• Previous MI (within 1 month) with thrombolytic treatment

- Cardiogenic shock in the absence of brachycardia or other correctable causes
- Known hypersensitivity to hypothermia (including Raynaud's), contrast media (that cannot be adequately pre-medicated), buspirone hydrochloride, or meperidine
- Hypersensitivity or contraindication to aspirin, heparin
- Currently taking MAO inhibtor
- History of bleeding diathesis, coagulopathy, renal insufficiency, untreated hypothyroidism, Addison's Disease, benign prostate

# **Ovarian Cancer**

Sponsor: Gynecologic Oncology Group
Contact: Richard Kline, MD 504 842-3708
Gary Lagasse, MSHCM 504-842-3708

# Title:

GOG #0187: Phase II study of paclitaxel for ovarian stromal tumors as first-line or second-line therapy.

#### **Objectives:**

- Estimate the probability of clinical response and toxicity of paclitaxel as first-line or second-line chemotherapy in measurable disease patients with malignant tumors of the ovarian stroma
- Evaluate the value of inhibin for predicting response to therapy with paclitaxel

#### **Inclusion Criteria:**

- Histologically confirmed ovarian stromal tumor (granulosa cell, granulosa cell-theca cell, Sertoli-Leydig cell, androblastoma, gynandroblastoma, unclassified sex cord stromal, sex cord with annular tubules)
- Previously untreated disease diagnosed within 8 weeks prior to study entry or recurrent stromal tumor with no more than one prior chemotherapy regimen

#### **Exclusion Criteria:**

- GOG performance grade 3 or 4
- Prior invasive malignancy (except nonmelanoma skin cancer) with evidence of disease within the last 5 years or prior treatment that contraindicates the current protocol

# **Prostate Cancer Prevention**

**Sponsor**: National Cancer Institute

**Investigator**: Carl Kardinal, MD 504 842-3708

#### Title:

SWOG S0000 Selenium and vitamin E cancer prevention (SELECT) phase III (prostate cancer prevention).

# **Study Objective:**

To assess the effect of selenium and vitamin E alone and in combination on the incidence of prostate cancer.

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#### **Inclusion Criteria**

- Male over the age of 54; African American men must be over the age of 49
- Participants must have a digital rectal examination that does not indicate prostate cancer
- Total prostate specific antigen count > 4

# **Exclusion Criteria**

- History of prostate cancer
- · Currently receiving anticoagulant therapy
- History of hemorrhagic stroke

# **Skin Infections**

**Sponsor:** Ochsner Clinic Foundation **Contact:** George Pankey, MD

Joseph Dalovisio, MD

Patricia Schaefer, RN, CCRC 504 842-4005

#### Title:

A prospective, randomized, double blind, multicenter trial assessing the safety and efficacy of sequential (intravenous/oral) BAY 12 -8039 (moxifloxacin) 400 mg every 24 hr compared to intravenous piperacillin/tazobactam 3.0/0.375 g every 6 hr followed by oral amoxicillin/clavulanic acid suspension 800 mg every 12 hr for the treatment of patients with complicated skin and skin structure infections.

#### **Study Objective:**

To compare the safety and efficacy of 2 sequential (intravenous/oral [IV/PO]) treatment regimens for the treatment of adult patients with complicated skin and skin structure infections.

# **Inclusion Criteria:**

- Hospitalized male or female > 18
- Diagnosis of a skin or skin structure infection such as infected ischemic ulcer, diabetic foot, decubitus ulcer, major abscess, carbunculosis, postoperative surgical wound, or bite wound.
- Presence of at least 3 signs and symptoms [drainage/discharge, erythema, fluctuance, heat/localized warmth, pain/tenderness, swelling/induration, or fever]
- Appropriate specimen

# **Exclusion Criteria:**

- Infection of prosthetic materials
- Folliculitis or furunculosis
- Infections where surgical procedure alone is definitive therapy
- Secondary infections
- Necrotizing fasciitis

# **Smoking Cessation**

**Sponsor**: National Cancer Institute

**Contact**: Carl Kardinal, MD 504 842-3708

# **Study Title**:

N99Ć4 Phase III trial comparing nicotine inhaler vs. bupropion vs. nicotine inhaler plus bupropion for smoking cessation efficacy and relapse prevention.

# **Study Objective:**

To determine if various combinations of a nicotine inhaler and the drug bupropion can help people stop smoking and stay smoke free.

# **Inclusion Criteria:**

- Males or nonpregnant females over the age of 18
- Currently smoking at least 10 cigarettes per day
- Has smoked regularly for the past 12 months

#### **Exclusion Criteria:**

- Pregnancy
- Current participation in another smoking cessation program
- History of seizure disorder or other serious head trauma
- Use of anti-epileptic medications

# **Vulvar Cancer**

**Sponsor:** Gynecologic Oncology Group

Contact: Richard Kline, MD 504 842-3708

Gary Lagasse, MSHCM 504 842-3708

#### Title:

GOG #0185: Phase III randomized study of adjuvant radiation treatment vs. radiation and chemotherapy (cisplatin) in patients with vulvar cancer and involved nodes.

#### **Objectives:**

- Assess whether the addition of concurrent chemotherapy to inguino/femoral and pelvic nodal irradiation improves recurrence-free interval and survival in patients with carcinoma of the vulva with positive inguino/femoral lymph nodes
- Assess the toxicity of concurrent chemotherapy and inguino/ femoral and pelvic nodal irradiation in patients with carcinoma of the vulva with positive inguino/femoral lymph nodes

#### **Inclusion Criteria:**

- Primary histologically confirmed squamous cell carcinoma of the vulva stages I-III amenable to curative treatment with surgery, radiation, or both
- Must have one or more positive inguinal and/or femoral lymph nodes

### **Exclusion Criteria:**

• Inoperable (fixed or ulcerating) groin nodes

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